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APPLICANTS

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**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

IF REQUIRED

** 03/20/1998		Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met		<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged		Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

SECURE NETWORK ARCHITECTURE WITH QUALITY OF SERVICE

FILING FEE RECEIVED 1776	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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